(Print Name of lobbyist)

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NEW HAMPSHIRE DEPARTMENT OF STATE

| | | 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) |
|----------|--------------|----------------------------------------------------------------------------|
| V 1910 B | PLEASE PRINT | |

| II. Name of lobbyist's | partnership, firm or co | rporation, if any: | | |
|---------------------------------------------------------------|------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | sional Association | | | |
| | ne of partnership, firm or cor | poration) | | |
| 18 Centre Str | | Concord | NH | 03301 |
| Business Address: (Str | | (Town/City) | (State) | (Zip Code) |
| (603) 225-7170 (Telephone) | (603); | 226-0165 (Fax) | e-mail_attys@b | iancopa.com |
| | vers: (Choose one – file ransactions which are no | | | y file a separate report for |
| X All reportable trans | sactions occurring in the t | months prior to the | reporting date relative to the | e following client: |
| T-Mobile US, In | ic. | | | · · · |
| OD | (Full Name of Client as it | appears on the Lobby | ist Registration Form) | |
| OR All reportable trans unrelated to any partic | | ncluding the lobbyi | st's family), or the lobbying | firm listed below which are |
| IV. Date of Report Reports cover: activ | April 26, 2017 ity from date of registration | to 3/31/17 | July 26, 2017 activity from 4/1/17 to 6/30/17 | |
| | October 25, 2017 X activity from 7/1/17 to 9/30. | (17 | January 31, 2018 activity from 10/1/17 to 12/31. | 47 |
| V. There have been If this box is checked, Concord, NH 03301. | no fees received and complete just this form an | no reportable tr ad submit it to the S | ansactions made since t ecretary of State's Office, S | he last report. 1: tate House, Room 204. |
| VI. Check if addition | ial reports are attached: | | | |
| | | | Addendum A – Fees and E | |
| Expense Reimburseme | ent | | nust file Addendum B - Re | |
| If you, your firm. | or your family has made | political contribution | ons, you must file Addendu | m C Political Contribution |
| I have read RSA 15, I and complete to the bo | est of my knowledge and | RSA 664 and here belief. | by swear or affirm that the $\begin{bmatrix} 0 & 25 \\ 0 & 0 \end{bmatrix}$ | foregoing information is true $ \int_{0}^{\infty} \int_{$ |
| (Signature of lobbyis | 7 | | · (Da | (C) |
| James J. Biand | co, Jr. | | | |

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) James J. Bianco, Jr., Adam Schmidt, Karen S | Soucy, Kathy Corey Fox |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| II. Name of lobbyist's partnership, firm or corporation, if any: | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Bianco Professional Association | |
| (Name of partnership, firm or corporation) | |
| III. Name of Client T-Mobile-US, Inc. | Date10/25/17 |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The granduced by any expenses: | t relations, or public relations service |
| a) Total of all fees received in this reporting period | a) \$ |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y | b) \$ |
| c) Total of all fees received to date (Add lines a and b) | e) \$30,875 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$625 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repeating purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses pair expenses; (b) the aggregate total of all expenses pair expenses; (b) the aggregate total of all expenses; and set with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of er than \$25, but not greater than \$50, expense reimbursement, or political |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$10,125 |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | f) \$ 31,500 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | \$ |
| ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- · | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of myknowledge and belief. | n that the foregoing information |
| | 10/25/17 |
| (Signature of lobbyist) | (Date) |
| James J. Bianco, Jr. | |
| (Print Name of lobbyist) | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

| Name of Lobbying partnership, f | ying partnership, firm, or corporation: Bianco Professional Association | | | |
|------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------------|--|
| | atement is fo | r the partnership, firm, or | corporation and not related to any | |
| Date of Report (check one): | | | | |
| April 26, 2017 □ July 26 | , 2017 □ | October 25, 2017 💢 | January 31, 2018 □ | |
| I have read RSA 15, RSA 15-B, the following Addendums subm submitted): | RSA 664, th | ne Statement of Income ar at Statement (insert the nu | nd Expenses described above, and umber of Addendum forms being | |
| Addendum A(s). | | | | |
| Addendum B(s). | | | | |
| Addendum C(s). | | | | |
| I hereby swear or affirm that the complete to the best of my know | | | nt and each Addendum is true and Old (17 (Date) | |
| (Signature of lobbyist) | <u>u</u> | | (Date) | |
| Adam Schmidt | <u> </u> | | | |
| (Print Name of lobbyist) | | | | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

| Name of Lobbying partnership, firm | n, or corporation: | Bianco Professio | nal Association |
|-------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------|------------------------------------------------------------|
| Name of Client (leave blank if State particular client): T-Mobile US, | ement is for the pa | | |
| Date of Report (check one): | | | |
| April 26, 2017 □ July 26, 2 | 017 □ Octol | ber 25, 2017 💢 | January 31, 2018 □ |
| I have read RSA 15, RSA 15-B, R the following Addendums submitted submitted): | SA 664, the States ed with that States | ment of Income and ment (insert the num | Expenses described above, and aber of Addendum forms being |
| Addendum A(s). | | | |
| Addendum B(s). | | | |
| Addendum C(s). | | | |
| I hereby swear or affirm that the fo complete to the best of my knowled | | on on the Statement | and each Addendum is true and |
| (Signature of lobbyist) | Â | 19 | (Date) |
| Kathy Corey Fox | | | |
| (Print Name of lobbyist) | | | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

| Name of Lobbying partnershi | of Lobbying partnership, firm, or corporation: Bianco Professional Association | | | | |
|-------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------|--|--|
| | f Statement is for | | corporation and not related to any | | |
| Date of Report (check one): | | | | | |
| April 26, 2017 □ July | 26, 2017 🗆 | October 25, 2017 🔀 | January 31, 2018 □ | | |
| | | | nd Expenses described above, and umber of Addendum forms being | | |
| Addendum B(s). | | | | | |
| Addendum C(s). | | | | | |
| I hereby swear or affirm that complete to the best of my kn | | | nt and each Addendum is true and | | |
| (Signature of lobbyist) | | | (3)/(5/17) (Date) | | |
| Karen Soucy | | | | | |
| (Print Name of lobbyist) | | | | | |